

PTO/SB/22 (08-03)

Approved for use through 7/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)
PU040027

In re Application of Estill Thone Hall, Jr.

Application Number 10/590,428 Filed August 23, 2006

For A SIMPLIFIED POLARIZATION RECOVERY SYSTEM

Art Unit 2851 Examiner Ryan D. Howard

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- | | |
|---|---------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$130 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$_____ |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$_____ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$_____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$_____ |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$_____. | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>07-0832</u> . | |

I have enclosed a duplicate copy of this sheet.

I am the applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

attorney or agent of record. Registration Number _____

attorney or agent under 37 CFR 1.34(a).

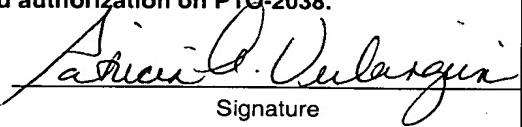
Registration number if acting under 37 CFR 1.34(a). 42,201.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

February 17, 2009

Date

Telephone Number


Signature

PATRICIA A. VERLANGIERI

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

02/20/2009 EFLORES 00000012 070832 10590428

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 130)

Complete if Known	
Application Number	10/590,428
Filing Date	August 23, 2006
First Named Inventor	Estill Thone Hall, Jr. et al.
Examiner Name	Ryan D. Howard
Art Unit	2851
Attorney Docket No.	PU040027

METHOD OF PAYMENT (check all that apply)
 Check Credit card Money Other None Order
 Deposit Account:

Deposit Account Number	07-0832
Deposit Account Name	THOMSON LICENSING INC., Customer No. 24498

The Director is authorized to: (check all that apply)

-
- Charge fee(s) indicated below
-
- Credit any overpayments
-
-
- Charge any additional fee(s) during the pendency of this application
-
-
- Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	Fee (\$)
1001	2001	385	Utility filing fee
1002	2002	170	Design filing fee
1003	2003	265	Plant filing fee
1004	2004	385	Reissue filing fee
1005	2005	80	Provisional filing fee
SUBTOTAL (1)		(\$ 0)	

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	** = 0	X _____	= 0
Multiple Dependent	** = 0	X _____	= 0

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	Fee (\$)
1202	18	2202 9
1201	88	2201 43
1203	300	2203 145
1204	88	2204 43
1205	18	2205 9
SUBTOTAL (2)		(\$ 0)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	Fee (\$)
1051	130	2051 65	Surcharge - late filing fee or oath
1052	50	2052 25	Surcharge - late provisional filing fee or cover sheet
1053	130	1053 130	Non-English specification
1812	2,520	1812 2,520	For filing a request for reexamination
1804	920*	1804 920*	Requesting publication of SIR prior to Examiner action
1805	1,840*	1805 1,840*	Requesting publication of SIR after Examiner action
1251	110	2251 55	Extension for reply within first month
1252	430	2252 210	Extension for reply within second month
1253	980	2253 475	Extension for reply within third month
1254	1,530	2254 740	Extension for reply within fourth month
1255	2,080	2255 1,005	Extension for reply within fifth month
1401	340	2401 165	Notice of Appeal
1402	340	2402 165	Filing a brief in support of an appeal
1403	300	2403 145	Request for oral hearing
1451	1,510	1451 1,510	Petition to institute a public use proceeding
1452	110	2452 55	Petition to revive – unavoidable
1453	1,370	2453 665	Petition to revive – unintentional
1501	1,370	2501 665	Utility issue fee (or reissue)
1502	490	2502 240	Design issue fee
1503	660	2503 320	Plant issue fee
1460	130	1460 130	Petitions to the Director
1807	50	1807 50	Processing fee under 37 CFR 1.17 (q)
1806	180	1806 180	Submission of Information Disclosure Stmt
8021	40	8021 40	Recording each patent assignment per property (times number of properties)
1809	790	2809 385	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	790	2810 385	For each additional invention to be examined (37 CFR § 1.129(b))
1801	790	2801 385	Request for Continued Examination (RCE)
1802	900	1802 900	Request for expedited examination of a design application

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 130)

SUBMITTED BY					
Name (Print/Type)	Patricia A. Verlangieri	Registration No. (Attorney/Agent)	42,201	Telephone	(609) 734-6867
Signature	<i>Patricia A. Verlangieri</i>		Date	February 17, 2009	

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First Named Inventor	Estill Thone Hall, Jr. et al.
Examiner Name	Ryan D. Howard
Art Unit	2851
Attorney Docket No.	PU040027

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 Check Credit card Money Other None
 Order
 Deposit Account:Deposit Account Number
07-0832Deposit Account Name
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The Director is authorized to: (check all that apply)

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SUBTOTAL (1)		(\$ 0)	

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Independent Claims [] - ** = 0	X [] = 0		
Multiple Dependent [] - ** = 0	X [] = 0		

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 18	2202 9	Claims in excess of 20
1201 88	2201 43	Independent claims in excess of 3
1203 300	2203 145	Multiple dependent claim, if not paid
1204 88	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$ 0)

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3. ADDITIONAL FEES

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Other fee (specify) _____			

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(\$ 130)

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